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Bib Data Sheet

CONFIRMATION NO. 2769

SERIAL NUMBER 10/658,722	FILING DATE 09/09/2003  RULE	CLASS 313	GROUP ART UNIT 2879	ATTORNEY DOCKET NO. 2003P11660US
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\*\* CONTINUING DATA \*\*\*\*\*

*msy*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

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IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 11/29/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature <i>msy</i> Initials <i>11/1/05</i>	CA	10	25	2

## ADDRESS

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## TITLE

Optimal bank shapes for inkjet printing

FILING FEE  RECEIVED 970	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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